



**State of Georgia
First Lady Sandra Deal
Official Meeting Request Form**

Date Submitted: _____

Meeting Name: _____

Affiliated Organizations (if applicable): _____

Meeting Date: _____ **Time:** _____

Meeting Location/Address: _____

Contact: _____ **Position/Title:** _____

Phone (Work) _____ **(Cell)** _____

Mailing Address _____

City _____ **State:** _____ **Zip:** _____

Email: _____

Other officials or special attendees: _____

Number of Attendees? _____

Meeting Details:

Please submit to:
Ember Bishop | Special Assistant to the First Lady
Office of the Governor
☎: 404.231.8621

✉: 391 West Paces Ferry Rd. Atlanta, GA 30305